

JAN 2 6 2015 S.D. SEC. OF STATE

State of South Dakota Campaign Finance Disclosure Statement

| Full Name of Committee: South Dakota | association of Specialty |
|--|--|
| Great Miner Jack Koup Committee Chair, Treasurer, Candidate Care Providers, F E-Mail | association of Specialty PAC gminer Osioux land surg. Kaup @bhsh.com |
| 1868 Lombardy Drive, Rapid | d City, SD 57703 |
| 1868 Lozubardy Drive, Ray | ed City, SD 57703 |
| Jack Kayp (605) 76 Name of Person Making Report Daytime Tel | 2/- 40/8 ephone # Evening Telephone # |
| If Candidate Committee, please note office being sought, and District # (If applicable) | Political party affiliation (if any) |
| If Baliot Question Committee, Ballot Question number or letter. | Supporting? Opposing? |
| Type of Campaign Statement: Pre-Primary Pre-Convention Pre-General Year- | End Amendment Supplement Termination |
| VERIFICATION OF PERSON MAKING REPORT I, Jack Kaup (print name legibly), certify that I have examined this report and to the best of my knowledge and belief it is true, correct and complete. I also understand that failure to timely file any statement, amendment, or correction required subjects the treasurer responsible for filing to a civil penalty per day for each day that the statement remains delinquent. OLAS AUIS Date Filed mis Signature of Treasurer Signature of Treasurer | p: 605-773-3537 f: 605-773-6580 e-mail to kea.warne@state.sd.us |

INCOME

Direct Contributions from Individuals

Each type of contributor has their own section for itemization. This schedule may be duplicated if you need more space or you may attach additional sheets of paper.

| Unitemized Contributions from Individuals | Am | ount |
|---|----|------|
| Enter total of all unitemized contributions (\$100 or less each from individuals) here: | \$ | |

Line item A1

| Enter all itemized contrib | utions (\$100.01 or more each from individuals) below: | |
|----------------------------|--|----------|
| Name | Residential (Street) Address including city, state and zip | Amoun |
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Direct Contributions from Organizations

An organization is defined as any corporate entity, partnership, association, club, labor union, or any group organized in a corporate form that is not defined as a political committee or political party. ONLY PAC's and Ballot Committee Questions may recieve direct contributions from organizations.

| Name | Residential (Street) Address including city, state and zi | p | Amoun |
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| tomizad Contribution | s - Enter total of all itemized contributions from organizations: | \$ | • |

Direct Contributions from Political Parties

| Contributions from Political Parties | | | |
|--------------------------------------|--|----|--------|
| Name | Residential (Street) Address including city, state and zip | | Amount |
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| | | \$ | |
| Enter total of all contributi | ons from Political Parties here: | \$ | |

Line item C1

Direct Contributions from In-State Political Action Committees

| Name | Residential (Street) Address including city, state and zip | Amount |
|--------------------------------|--|---------|
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| Enter total of all contributio | ons from South Dakota Political Action Committees or South Dakota Candidate Committees here: | \$ |

Direct Contributions from Out-of-State Political Action Committees

| Contributions from Federal Political Action Committees | | | |
|--|---|----|--------|
| Name | Filing Website Address | | Amount |
| | | \$ | |
| | | \$ | |
| | · | \$ | |
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| | | \$ | |
| | | \$ | |
| Enter total of all contributi | ons from Federal Political Action Committees or Out-of-State Candidate Committees here: | \$ | |

Line item D2

Direct Contributions from Candidate Committees

| Name | Residential (Street) Address including city, state and zip | Amount |
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| Enter total of all contribution | s from Candidate Committees here: | \$, |

Line item E1

In-Kind Contributions

| | on-cash contributions of good and services and the estimated fair market value | | |
|---|--|------|-------------|
| Description | Name and residential address | Esti | mated value |
| | | \$ | |
| | | \$ | |
| | | \$ | |
| | | \$ | |
| | | \$ | , |
| | | \$ | |
| | | \$ | |
| | | \$ | |
| | | \$ | |
| | | \$ | |
| Enter total of all estimated in-kind co | ontributions here: | \$ | |

Line item F1

Other Income

| Source of Income | Description of Income (i.e. raffles and auctions income) | | Amount |
|-----------------------------------|--|----|--------|
| | | \$ | |
| | | \$ | * |
| | | \$ | |
| Enter total of other income here: | | \$ | |

Line item G1

Establishing and Administering Committee/Solicitation Costs

List a categorical description and the estimated value of funds or donations by any organization to its political committee for establishing and administering the political committee or solicitation costs of the political committee.

| Organizational Name and Categorical Description for Direct Funds | Amount |
|--|---------|
| | \$ |
| | \$ 4 |
| | \$ |
| Enter total here: | \$ |

Line item H1

EXPENDITURES

Operational Expenditures

Categories have been provided for reporting common expenses. You may list other expense items at your discretion

| Campaign Expenses | Amount |
|---|---------|
| Advertising | \$ • |
| Consulting | \$ 4 |
| Interest | \$ • |
| Postage | \$ • |
| Printing | \$ |
| Rent | \$ • |
| Salaries | \$ |
| Telephone | \$ |
| Travel | \$ |
| Utilities | \$ |
| List other expense items below (i.e. donations to organizations, gifts, meals, fundraising expenses): | \$ • |
| | \$ |
| | \$ |
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| Enter total expenditures here: | \$ |

Line item X1

Contributions Made to Candidates and Committees

| Name of Candidate or Committee | Amount |
|--|---------|
| | \$ |
| | \$ |
| | \$ • |
| | \$ • |
| | \$ • |
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| | \$ |
| | \$ |
| Enter total of contributions to candidates or committees here: | \$ |

Line item X2

Debts and Obligations Owed by this Committee

| Owed to/Creditor's Name | Nature of obligation | Address | Amount |
|--|----------------------|---------|---------|
| | | | \$ • |
| | | | \$ |
| | | | \$ |
| | | | \$ |
| Enter total debt owed by committee here: | | \$ | |

^{*}This would include loans that have been made to this committee (i.e. personal loan to committee).

Line item X3

Loans Owed to this Committee

| Name of recipient of loan, including address. | Amount of loan made during the reporting period | Amount of loan repaid during the reporting period | 7 | Balance of loan at the end of the reporting period |
|---|---|---|----|--|
| | \$ | \$. | \$ | |
| | \$ • | \$. | \$ | |
| | \$ | \$. | \$ | |
| Enter total amount of loans owed to committee here: | \$ | \$. | \$ | • |

^{*}This would include loans to other committees.

Line item Y1

Line item Y2

Line item Y3

SUMMARY OF INCOME AND EXPENDITURES

| Balance c | of cash and cash equivalents on hand, if any, at the beginning of the re | eporting period: | \$ 84.8 |
|---------------|--|------------------|----------|
| | | | |
| | | Income | Expenses |
| | · · · · · · · · · · · · · · · · · · · | Hiteothic | EXPENSES |
| | Candidate's Personal Contribution to Own Campaign | \$. | |
| | | | |
| Income: | | | |
| | Unitemized Contributions (A1) | \$. | |
| | Itemized Contributions (A2) | \$. | |
| | Contributions from Organizations (B1) | \$. | |
| | Contributions from Political Parties (C1) | \$. | |
| | Contributions from In-State PACs (D1) | \$. | |
| | Contributions from Out-of-State or Federal PACs (D2) | \$. | |
| | Contributions from Candidate Committees (E1) | \$. | |
| | Other Income (G1) | \$. | |
| | Expenditures from an external source to establish a committee (H1) | \$. | |
| | | | |
| | | | |
| Expenditures | | | |
| | Operational Expenditures (X1) | | \$. |
| | Contributions to Candidates and Committees (X2) | | \$. |
| | Debts and Obligations Owed by the Committee (X3) | | \$. |
| | | | |
| Loan Activity | | | |
| | Monetary loan made to this Committee during reporting period (Y1) | \$. | |
| | Monetary loan repaid to this Committee during reporting period (Y2) | | \$. |
| | | | |
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| | | | |
| Am | ount on hand at the end of the reporting period: | \$ | 84 ·83 |

In-Kind Contributions (F1) which are not included in your ending balance \$_____

*Note: You cannot end the reporting period with a negative balance.

County, municipal and school candidates file with the person in charge of the local election.